Rating

¹50

	Vaginal fecal leakage one to three times
	per week requiring wearing of pad
	Vaginal fecal leakage less than once a week
	Without leakage
7625	Fistula, urethrovaginal:
7023	Multiple urethrovaginal fistulae
	Requiring the use of an appliance or the
	wearing of absorbent materials which must be changed more than four times
	per day Requiring the wearing of absorbent mate-
	rials which must be changed two to four times per day
	Requiring the wearing of absorbent mate- rials which must be changed less than
	two times per day
7626	Breast, surgery of:
	Following radical mastectomy:
	Both
	One
	Following modified radical mastectomy: Both
	One
	Following simple mastectomy or wide loca excision with significant alteration of size or form:
	Both
	One
	Following wide local excision without sig- nificant alteration of size or form:
	Both or one
	Note: For VA purposes:
	 Radical mastectomy means removal of the entire breast, un-
	derlying pectoral muscles, and regional lymph nodes up to the
	coracoclavicular ligament (2) Modified radical mastectomy
	means removal of the entire breast and axillary lymph nodes
	(in continuity with the breast) Pectoral muscles are left intact.
	(3) Simple (or total) mastectomy
	means removal of all of the breast tissue, nipple, and a
	small portion of the overlying skin, but lymph nodes and mus- cles are left intact
	(4) Wide local excision (including partial mastectomy.
	lumpectomy, tylectomy, segmentectomy, and
	quadrantectomy) means re- moval of a portion of the breast
7007	tissue
	Malignant neoplasms of gynecological sys- or breast

	Rating
Note: A rating of 100 percent shall continue beyond the cessation of any surgical, X-ray, antineoplastic chemotherapy or other therapeutic procedure. Six months after discontinuance of such treatment, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of §3.105(e) of this chapter. If there has been no local recurrence or metastasis, rate on residuals. 7628 Benign neoplasms of the gynecological system or breast. Rate according to impairment in function of the urinary or gynecological systems.	
or skin.	
7629 Endometriosis: Lesions involving bowel or bladder confirmed by laparoscopy, pelvic pain or heavy or irregular bleeding not controlled by treatment, and bowel or bladder	
symptoms	50
Pelvic pain or heavy or irregular bleeding not controlled by treatment Pelvic pain or heavy or irregular bleeding	30
requiring continuous treatment for control Note: Diagnosis of endometriosis must be substantiated by laparoscopy.	10

 $^{^{\}rm 1} \mbox{Review}$ for entitlement to special monthly compensation under $\S\,3.350$ of this chapter.

[60 FR 19855, Apr. 21, 1995, as amended at 67 FR 6874, Feb. 14, 2002; 67 FR 37695, May 30, 2002]

THE HEMIC AND LYMPHATIC SYSTEMS

$\$\,4.117\,$ Schedule of ratings—hemic and lymphatic systems.

lymphatic systems.	
	Rating
7700 Anemia, hypochromic-microcytic and megaloblastic, such as iron-deficiency and pernicious anemia:	
Hemoglobin 5gm/100ml or less, with find- ings such as high output congestive heart failure or dyspnea at rest Hemoglobin 7gm/100ml or less, with find-	100
ings such as dyspnea on mild exertion, cardiomegaly, tachycardia (100 to 120 beats per minute) or syncope (three episodes in the last six months)	70
Hemoglobin 8gm/100ml or less, with find- ings such as weakness, easy fatigability, headaches, lightheadedness, or short- ness of breath	30
Hemoglobin 10gm/100ml or less with find- ings such as weakness, easy fatigability or headaches	10
tomatic	C
NOTE: Evaluate complications of pernicious anemia, s dementia or peripheral neuropathy, separately.	uch as
7702 Agranulocytosis, acute: Requiring bone marrow transplant, or; requiring transfusion of platelets or red cells at least once every six weeks, or; infections recurring at least once every six weeks	100

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	Rating
Requiring transfusion of platelets or red cells at least once every three months, or; infections recurring at least once every three months	30 10
NOTE: The 100 percent rating for bone marrow tra- shall be assigned as of the date of hospital admiss shall continue with a mandatory VA examinat months following hospital discharge. Any change uation based upon that or any subsequent exan shall be subject to the provisions of §3.105(e) chapter.	ion and ion six in eval- nination
7703 Leukemia: With active disease or during a treatment phase Otherwise rate as anemia (code 7700) or aplastic anemia (code 7716), whichever would result in the greater benefit.	100
NOTE: The 100 percent rating shall continue beyond t sation of any surgical, radiation, antineoplastic therapy or other therapeutic procedures. Six mont discontinuance of such treatment, the appropriate d rating shall be determined by mandatory VA exam Any change in evaluation based upon that or any quent examination shall be subject to the provis § 3.105(e) of this chapter. If there has been no recurate on residuals.	chemo- hs after lisability nination. subse- sions of
7704 Polycythemia vera: During periods of treatment with myelosuppressants and for three months following cessation of myelosuppressant therapy. Requiring phlebotomy	100 40 10 stroke
7705 Thrombocytopenia, primary, idiopathic or immune: Platelet count of less than 20,000, with action the blooding acceptable to	
tive bleeding, requiring treatment with medication and transfusions	100
not requiring treatment, without bleeding Stable platelet count between 70,000 and 100,000, without bleeding	70 30
Stable platelet count of 100,000 or more, without bleeding	0 20
NOTE: Rate complications such as systemic infection encapsulated bacteria separately.	
7707 Spleen, injury of, healed.	

With active disease or during a treatment

NOTE: The 100 percent rating shall continue beyond the cessation of any surgical, radiation, antineoplastic chemo-

therapy or other therapeutic procedures. Six months after discontinuance of such treatment, the appropriate disability

rating shall be determined by mandatory VA examination.

Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of

§ 3.105(e) of this chapter. If there has been no local recur-

rence or metastasis, rate on residuals.

Requiring transfusion of platelets or red cells at least once every three months, or; infections recurring at least once every three months. Requiring transfusion of platelets or red cells at least once per year but less than once every three months, or; infections recurring at least once per year but less than once every three months. Requiring continuous medication for control Note: The 100 percent rating for bone marrow transhall be assigned as of the date of hospital admiss shall continue with a mandatory VA examinat months following hospital discharge. Any change uation based upon that or any subsequent examination based upon that or any subsequent ex	ansplant sion and tion six in eval-mination of this	7710 Adenitis, tuberculous, active or inactive. Rate under §§ 4.88c or 4.89 of this part, whichever is appropriate. 7714 Sickle cell anemia: With repeated painful crises, occurring in skin, joints, bones or any major organs caused by hemolysis and sickling of red blood cells, with anemia, thrombosis and infarction, with symptoms precluding even light manual labor With painful crises several times a year or with symptoms precluding other than light manual labor Following repeated hemolytic sickling crises with continuing impairment of health Asymptomatic, established case in remission, but with identifiable organ impairment NOTE: Sickle cell trait alone, without a history of directivity tributable pathological findings, is not a ratable d Cases of symptomatic sickle cell trait will be forwethe Director, Compensation and Pension Service, sideration under § 3.321(b)(1) of this chapter. 7715 Non-Hodgkin's lymphoma: With active disease or during a treatment	isability. arded to		
therapy or other therapeutic procedures. Six mont discontinuance of such treatment, the appropriate or rating shall be determined by mandatory VA exan Any change in evaluation based upon that or any quent examination shall be subject to the provis § 3.105(e) of this chapter. If there has been no recirate on residuals.	ths after disability nination. subse- sions of	phase			
7704 Polycythemia vera: During periods of treatment with myelosuppressants and for three months following cessation of myelosuppressant		quent examination shall be subject to the provis §3.105(e) of this chapter. If there has been no local rence or metastasis, rate on residuals.	sions of		
therapy Requiring phlebotomy Stable, with or without continuous medication There are liesting to the continuous medication	100 40 10	Requiring bone marrow transplant, or; re- quiring transfusion of platelets or red cells at least once every six weeks, or; infections recurring at least once every six weeks	100		
Note: Rate complications such as hypertension, gour or thrombotic disease separately. 7705 Thrombocytopenia, primary, idiopathic or im-	t, stroke	Requiring transfusion of platelets or red cells at least once every three months,	100		
mune: Platelet count of less than 20,000, with active bleeding, requiring treatment with medication and transfusions	100	or; infections recurring at least once every three months	60		
not requiring treatment, without bleeding Stable platelet count between 70,000 and 100,000, without bleeding	70 30 0	than once every three months	ansplant		
7706 Splenectomy	20	shall continue with a mandatory VA examinal months following hospital discharge. Any change uation based upon that or any subsequent example be subject to the provisions of §3.105(e)	tion six in eval- mination		
7707 Spleen, injury of, healed. Rate for any residuals.		chapter.	01 11115		
7709 Hodgkin's disease:		[60 ED 40997 Cont 99 1005]			

[60 FR 49227, Sept. 22, 1995]

THE SKIN

§ 4.118 Schedule of ratings—skin.

A veteran who VA rated under diagnostic codes 7800, 7801, 7802, 7803, 7804, or 7805 before October 23, 2008 can request review under diagnostic codes

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